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WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.

FILL OUT ALL BLANKS.

AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in Plain Terms, that it may be properly classified. If any item can not be obtained, insert word "unknown". Make every effort possible to secure this information. Incorrect certificates will be returned for correction.

PLACE OF DEATH			ARIZONA STATE BOARD OF HEALTH	
BUREAU OF VITAL STATISTICS			State Index No. 63	
ORIGINAL CERTIFICATE OF DEATH			County Registrar's No. 128	
Local Registrar's - No.				
No. 569 Ash				
(If death occurred in a hospital or institution, give its NAME instead of street and number.)				
FULL NAME Julia I Howard				
PERSONAL AND STATISTICAL PARTICULARS				
SEX Female	Color or Race White Indian Black Chinese Mexican	SINGLE MARRIED WIDOWED or DIVORCED	DATE OF DEATH June 8th 1921 (Month) (Day) (Year)	
DATE OF BIRTH July 8th 1851 (Month) (Day) (Year)		I hereby certify that I attended deceased from July 1921, to June 1921; that I last saw her alive on July 1921, and that death occurred on the date stated above at 6 P. M. The DISEASE or INJURY causing death was as follows: Cancer of bowels		
AGE 69 yrs. 12 mos. 10 days		(Duration) 2 yrs. 10 mos. 10 days		
OCCUPATION (a) Trade, profession or particular kind of work (b) General nature of industry, business, or establishment in which employed or (employer)		Was disease contracted in Arizona? yes		
BIRTHPLACE (State or Country) Georgia		If not, where?		
NAME OF FATHER Joseph L. Dyart		CONTRIBUTORY		
BIRTHPLACE OF FATHER (State or Country) England		(Duration) yrs. mos. days		
MAIDEN NAME OF MOTHER Sarah Upshaw		(Signed) S. E. Waghman		
BIRTHPLACE OF MOTHER (State or Country) Georgia		6/9 1921 (Address) Globe, Ariz.		
*If death from violent causes state (1) means of injury, and (2) whether Accidental, Suicidal or Homicidal.				
LENGTH OF RESIDENCE				
At place of death 1 yrs. 6 mos. 10 days in Ariz. 20 yrs. mos. ds.				
Former or Usual Residence Thatcher, Arizona				
Filed June 9 1921 B. G. Fox				
Local Registrar.				
Filed July 5 1924 B. G. Fox				
County Registrar.				

The Above is True to the Best of My Knowledge.	
(Informant) N. J. Phelps	
(Address) Globe, Arizona	
PLACE OF BURIAL OR REMOVAL	DATE OF BURIAL OR REMOVAL
1 Hubbard, Ariz.	June 10th 1921
UNDERTAKER J. L. Jones & Son	ADDRESS Globe, Ariz.

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